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CONFIRMATION NO. 9383

SERIAL NUMBER 10/062,178	FILING DATE 01/31/2002 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 1.096.01
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APPLICANTS

Johann F. Hellenkamp, Miami, FL;

THIS APPL IS A CIP OF 09/841,165 ~~ABN~~ ABN
 WHICH IS CON OF 08/840,430 PAT. 6,296,649
 WHICH IS CON OF 08/598,180 PAT. 5,624,456

** CONTINUING DATA

AND A CIP OF 09/065,848 PAT. 6,007,553
 WHICH IS A CIP OF 08/845,171 PAT. 6,051,009

** FOREIGN APPLICATIONS

AND A CIP OF 09/690,204 PAT. 6,605,099
 WHICH IS A CON OF 09/433,478 PAT. 6,132,446
 AND A CIP OF 09/433,479 PAT. 6,527,788,

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/01/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 9	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature <i>Mr. [Signature]</i> Initials				

ADDRESS

MALLOY & MALLOY, P.A.
 2800 S.W. Third Avenue
 Historic Coral Way
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 33129

TITLE

Automatic surgical device and control assembly for cutting a cornea

FILING FEE RECEIVED 1242	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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